

Recruitment of Underrepresented Minority Students to Medical School: Minority Medical Student Organizations, an Untapped Resource

Bernice B. Rumala, MA and Frederick D. Cason Jr., MD, FACS

Recruitment of more underrepresented minority students (black, Hispanic and native American) to increase racial diversity in the physician workforce is on the agenda for medical schools around the nation. The benefits of having a racially diverse class are indisputable. Minority physicians are more likely to provide care to minority, underserved, disadvantaged and low-income populations. Therefore, medical schools would benefit from diversity through utilizing strategies for recruitment of underrepresented minority (URM) students. Numerous recruitment strategies have been employed to increase the number of underrepresented minority students. However, formal collaboration with minority medical student organizations is an underutilized tool in the recruitment process. Many medical schools have informally used minority medical students and members of various minority organizations on campus in the recruitment process, but a formal collaboration which entails a strategic approach on using minority medical student organizations has yet to be included in the literature. This paper discusses the innovative collaboration between the University of Toledo College of Medicine (UTCOM) chapter of the Student National Medical Association (SNMA) and the college of medicine's admissions office to strategize a recruitment plan to increase the number of underrepresented minority students at the UTCOM. This paper suggests that minority medical student organizations, particularly the SNMA, can be used as a recruiting tool; hence, admissions offices cannot negate the usefulness of having formal involvement of minority medical student organizations as a recruiting tool. This approach may also be applicable to residency programs and other graduate professional fields with a severe shortage of URM students.

Key words: minority recruitment ■ education ■ National Medical Association

© 2007. From the Office of Student Affairs (Rumala, SNMA chapter president, NMA student liaison) and Department of Surgery, University of Toledo Medical Center (Cason Jr., associate professor and residency program director, Surgery Department, NMA historian, surgery section), University of Toledo College of Medicine, Toledo, OH. Send correspondence and reprint requests for *J Natl Med Assoc.* 2007;99:1000-1009 to: Bernice B.

Rumala, University of Toledo College of Medicine, Office of Student Affairs, Mulford Library Building, 3045 Arlington Ave., Toledo, OH 43614; e-mail: bernice.rumala@utoledo.edu

INTRODUCTION

Recruitment of more underrepresented minority (URM) students (black, Hispanic and native American) to medical school is a vital factor in increasing racial diversity in the physician workforce. To this end, recruitment of more URM students to increase racial diversity in the physician workforce is on the agenda for medical schools around the nation. This paper will describe a novel approach at the University of Toledo College of Medicine (UTCOM) that was initiated by the Student National Medical Association (SNMA) in collaboration with the college of medicine's admissions office to recruit more URM students to the college of medicine.

The healthcare disparities gap is widening.¹ In 2006, the Association of American Medical Colleges (AAMC) set a mandate that all medical schools increase their class size by 30% to address the physician shortage around the nation.² Implementing this increase must also be coupled with a strong commitment towards increasing the number of URM (black, Hispanic and native-American) matriculants.³ Increasing the number of physicians and increasing diversity are equally important and inseparable goals.³ URM make up 6% of the physician workforce,⁴ and 2006 URM medical school graduates only comprised of 14% of total graduates.⁵ These statistics are alarming considering that URM comprise 30% of the U.S. population.⁶ The benefits of having a racially diverse medical school class are irrefutable. Diversity enhances the educational experience,⁷ cultural sensitivity through cross-cultural exchange,⁷ and professionalism,⁸ and—most importantly—increases the number of physicians who will provide care to the underserved.^{1,9-11} Studies on the benefits of racial diversity have shown that once URM medical students become practicing physicians, they are more likely to provide care to minori-

ty, underserved, disadvantaged and low-income populations.^{1,9-11} Therefore, medical schools would benefit from diversity through utilizing strategies for recruitment of URM students.

Numerous recruitment strategies have been employed to increase the number of URM matriculants, including educational pipeline programs, combined bachelors and medicine programs,¹²⁻¹⁴ postbaccalaureate programs,¹⁵ partnerships with minority serving undergraduate institutions such as historically black colleges and universities (HBCUs), recruitment visits at colleges around the nation, recruitment at conferences, financial incentives/scholarships,¹⁶ health professions partnership programs¹⁷ and institutional commitment.¹⁶ However, formal collaboration of minority medical student organizations in the recruitment of URM students to medical school is an underutilized tool in the recruitment process. Many medical schools across the nation have informally used minority medical students and members of various minority organizations on campus to help in the recruitment process, but a formal collaboration which entails a strategic approach on using minority medical student organizations has yet to be included in the literature.

BACKGROUND

Established in 1964, the Medical College of Ohio merged with the University of Toledo on July 1, 2006 to become the UTCOM. The UTCOM's stated mission is to improve the human condition; to advance knowledge through excellence in learning, discovery and engagement; and to serve as a diverse, student-centered public metropolitan research university.¹⁸

Table 1 shows URM matriculants from 1996–2006. Since the spike in 1999, URM matriculants comprised ≤5% of total medical school matriculants. The recruitment collaboration was implemented for the 2005–2006 admissions cycle, when URM matriculants were 5% of the entering class. In the 2005–2006 recruitment cycle, the UTCOM, in collaboration with the SNMA, sought to increase the number of URM matriculants through incorporating the campus minority medical student organization as a recruitment tool. Although one cannot conclude a trend based on the 2006 admissions statistics, one can see that the collaborative recruitment effort may help to facilitate a trend towards improvement of the

numbers of URM students at the college of medicine.

The SNMA was established in 1964 under the auspices of the National Medical Association (NMA) by students of Meharry Medical College and Howard University College of Medicine. The SNMA was created as a result of the NMA recognizing the need to give active support to minority medical students and to encourage more recruitment of minority students to medicine.¹⁹ The SNMA became an independent corporation in 1971.¹⁹ It is the oldest and largest organization representing the needs of URM medical students (African Americans, Hispanics and native Americans) in the nation. SNMA has >6,000 members and >125 chapters nationwide. The SNMA's national programs reflect its commitment to bridge the health disparities gap through increasing the number of URM medical students through recruitment, retention, educational pipeline programs and advocacy. At the chapter level, the minority medical student organization at the UTCOM is the SNMA. The chapter was revitalized in 2005 as a result of a need to serve as a recruitment force to bring more URM students to the medical school. This revitalization also served as a supportive network for current URM students on the health science campus since there was no other minority student organization in existence on this campus to support minority students in the health professions and graduate school. Since being revitalized in 2005, the UTCOM's chapter of the SNMA is being used as a recruiting tool to bring more racial diversity to the college of medicine.

Initiating the Recruitment Strategy

The idea for formal collaboration with an administrative infrastructure was initiated by the school's chapter of the SNMA; after consultation with SNMA members and prospective students about the need for such an initiative to contribute in increasing the numbers of URM students at the institution. Components of the strategy were derived from informal group discussions with current students, prospective interviewees and speaking with various administrative members on campus about their perceptions on the lack of diversity on campus and what can be done to recruit more students. From the discussion feedback, it was realized that the minority medical student organization on campus can play an important role as a recruitment tool.

Table 1. Underrepresented minority student matriculants at University of Toledo College of Medicine, 1996–2006

	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Blacks/African Americans	9	10	2	14	1	1	2	2	4	5	10
Hispanics (Mexicans included in this group)	3	2	8	6	2	3	2	1	1	1	4
Native Americans	0	0	1	0	1	0	1	1	2	2	0
Total URM	12	12	11	20	4	4	5	4	7	8	14
Total in class	135	134	135	139	140	143	151	154	135	145	145
% URM	8	9	8	14	3	5	3	2	5	5	9

Prior to implementing the recruitment strategies, there were some perceived challenges in the matriculation of URM students to the college of medicine, which can be summarized into two categories: 1) concerns related to diversity of the medical school class and 2) lack of awareness about the UTCOM. This is especially true for non-Ohio state residents.

To address the aforementioned concerns, a proposal for recruitment and retention was written by an SNMA member for the SNMA in September 2005 and presented to various administrative entities for support. Such support for collaboration on the recruitment part of the proposal was obtained from the admissions office. From the period of September 2005 through July

2006, the SNMA began an aggressive recruitment strategy through formal collaboration with the UTCOM admissions office to recruit more minority students to the college of medicine (Table 2).

Having significant racial diversity on campus is a recruitment tool in itself.¹⁶ However, on a campus with severely low numbers of URM students, it presents a challenge. One of the prospective URM students perceived the lack of diversity on the medical school campus as one of the hindrances in her desire to matriculate at a particular medical school (personal communication, 2006 URM prospective student). This prospective student's perception may be shared by other students of color. Minority medical student organizations can play

Table 2. Timeline of minority medical student organization (SNMA) recruitment strategy

Date	Activity	Level of Participation
August 2005 – December 2005	<ul style="list-style-type: none"> • 8 underrepresented minority students in the entering class • SNMA formal collaboration with admissions office implemented • SNMA members and minority residents were contacted by SNMA leadership for participation in the recruitment initiative • SNMA proposed second-look weekend for college of medicine 	Medical student SNMA members
September 2005 – July 2006	<ul style="list-style-type: none"> • SNMA tracking of students with phone calls, e-mails, letters 	Medical student SNMA members, minority residents
October 2005 – May 2006	<ul style="list-style-type: none"> • SNMA members host prospective students in their homes for the interview and second-look weekend 	Medical student SNMA members
January 2006 – April 2006	<ul style="list-style-type: none"> • SNMA second-look weekend proposal approved for funding from the college of medicine • Involvement of SNMA in talks for college of medicine educational pipeline program for junior-high-school and high-school students • Presentation of recruitment collaboration to African-American recruitment subcommittee for support • Community involvement in recruiting of underrepresented minority students • 2 SNMA members sponsored by admissions office to recruit at SNMA national conference in Atlanta, GA • First annual SNMA second-look weekend 	Medical student SNMA members, faculty, staff, community members
May 2006 – August 2006	<ul style="list-style-type: none"> • Housing information and moving assistance provided to students who decided to matriculate • 14 URM students matriculate including 6 of the 7 participants of the first annual SNMA second-look weekend 	Medical student SNMA members, minority residents, faculty, staff, community members

a role in contributing to perceptions about diversity to prospective students. In the case of the UTCOM chapter of the SNMA, the SNMA medical student members and current minority residents (former SNMA members) expressed to prospective students the institution's current goals to increasing diversity on campus. SNMA served as a communication bridge to inform prospective minority medical students about the institution's diversity initiatives. In effect, although faculty and administrative presence are important in the recruiting process, prospective URM students are more likely to have confidence in responses from current URM students, another benefit of diversity and formal use of a minority medical student organization in the recruitment process.

Phases of the Recruitment Strategy

The recruitment strategy was implemented in five phases:

Phase 1: Identify obstacles, challenges and potential solutions for recruitment of URM students at the college of medicine. Obstacles and challenges toward recruitment of URM students were identified through informal group discussions with minority medical students, prospective students and some administrative members. A potential solution for the stated obstacles was presented by the SNMA in the form of formal collaboration with the admission's office to recruit URM students to the school.

Challenge addressed: Lack of diversity at the College of Medicine and lack of knowledge about the institution was a perceived obstacle in the matriculation of prospective minority students at the College of Medicine.

Solution: Formal collaboration of the minority medical student organization to use a student centered-peer mentorship approach to recruit more URM students to the college of medicine was implemented.

Phase 2: Tracking of students from before the interview through matriculation. The SNMA tracked students from September 2005 to July 2006 and presented weekly updates to the admissions office on the progress of recruitment strategies, which were logged on a tracking table. Members who participated in the recruitment process were medical students, URM residents, faculty/staff members and community members (Table 3). The recruitment strategy that was implemented can be seen in Table 2. Prospective students were contacted

and had interactions with an SNMA member ≥ 4 times via e-mail, phone call, snail mail and in person.

Challenge addressed: Some students who had initially applied chose to decline attendance at the interview, partly as a result of lack of knowledge about the institution and concerns related to the lack of diversity.

Solution: Create a personalized interactive experience for prospective candidates from before the interview through matriculation. This personalized interaction, in turn, helped prospective students to receive more information about the college of medicine from the perspective of current medical students of color. Current URM medical students kept in continual contact with prospective students and in essence built a peer mentorship that in some cases, extended far into matriculation at this medical school and other medical schools. Also, involvement of the SNMA in recruitment events at national conferences for students of color raised awareness about the UTCOM.

Phase 3: Reach out to diversity committee on campus and community members. SNMA presented the formal collaboration to the African American recruitment subcommittee to receive support. The committee is comprised of deans, faculty, staff, community members and students. Members of the committee offered support by volunteering to call prospective accepted students and answer any questions that they had about the Toledo community and the medical school.

Challenge addressed: To identify other sources of support from administrative infrastructures to facilitate the collaborative goals of the initiative.

Solution: SNMA contacted various committees on campus that shared a goal toward increasing diversity on campus. One such committee was the African-American recruitment subcommittee. As a result, SNMA members served as representatives on this committee to receive support for the initiatives.

Phase 4: Propose and implement second-look weekend. SNMA proposed the first ever second-look weekend in the history of the school (Table 4). There were seven URM participants in the second-look weekend; six of the seven students who participated in the second-look weekend matriculated at the college of medicine.

Challenge addressed: To let prospective students know that the school is invested in their matriculation at the institution through its commitment to diversity.

Solution: SNMA proposed and implemented the first ever second-look weekend in the history of the school (Table 4). The second-look weekend served as a forum to address any questions and concerns students had to make an informed decision about matriculation at the college of medicine. At this second-look weekend, prospective students also had the chance to personally meet senior administrative leaders, including the president of the university, dean for the college of medicine and vice president for the hospital. Students received a tour, vis-

Table 3. Participants of recruitment strategy

Type of Participant	Number
Medical student SNMA member	8
Minority resident	1
Faculty/staff	4
Community members	2

ited housing in the area, met with student leaders from various organizations, met with community members and participated in various social activities. One student commented that seeing senior administrative members and community members take time to participate in the second-look weekend made her feel valued (this student has matriculated at the college of medicine). Lastly, SNMA medical student members distributed an SNMA Toledo Living Packet, which comprised SNMA student recommendations for ethnic hair salons/barbershops, churches, beauty supply stores, housing and sites of interest.

Phase 5: Retention initiative. SNMA had quarterly minority dinners, which are a forum for URM students on the health science campus to form a support system. SNMA quarterly minority dinners served as a peer mentorship event. Networking occurred among faculty, staff, students and community members. These dinners concurrently served as an educational seminar to discuss topics related to health disparities. There was also an informal "big sib" mentorship between senior members of SNMA and new students that included sharing advice on succeeding in medical school, sharing notes and textbooks. This initiative was a way of maintaining retention through peer mentorship and forming support networks

among faculty, staff and community members. The dinners also served as a forum through which community members could reach out to current students and express their interest in having the students stay in the medically underserved Toledo community upon completion of their training. Funding for these dinners has been provided by the African American recruitment subcommittee, and they are ongoing.

Challenge addressed: Current students perceived a lack of a supportive network at the medical school. Although a supportive network was present, there was a lack of knowledge on whom the supportive entities were. Another challenge was lack of knowledge of the other URM in the professional schools on the health science campus, which is composed of the colleges of medicine, nursing, health and human services, and graduate studies.

Solution: Revitalization of the UTCOM SNMA chapter occurred to serve as a vehicle for recruitment and building of supportive networks. Proposal of quarterly minority dinners was presented so that URM students in all the professional schools of the health science campus have the chance to form collaborative and supportive networks with other students, faculty, staff and community members.

Table 4. University of Toledo College of Medicine SNMA second-look weekend schedule

Thursday, April 2006

Arrival at SNMA student host's place of residence

7-7:30 pm

Pick up participants

8-10 pm

Small mixer

Friday, April 2006

7:30-10 am

- Continental breakfast on Health Science Campus
- Hand out SNMA Toledo Living Packets (contains student recommendations for churches, ethnic hair salons/barbershops, beauty supply stores, housing and sites of interest)
- Meet UTCOM president, deans, faculty and students

10 am

- Session with financial aid representatives—how to fund your medical education
- Individual meetings with financial aid advisors

11 am

- SNMA information session—SNMA president
- Meet SNMA advisor and SNMA current leaders

11:30 am

Tour with the vice president of the hospital

12:15-1 pm

Attend SNMA campus-wide talk given by college of medicine alumnus

1:30 pm

Lunch

3-5 pm

- Tour of Toledo
- Opportunity for participants to look at apartments

6:30 pm

- Dinner with minority community members, community physicians and student leaders

9 pm

Bowling/miniature golf

Saturday, April 2006

10 am

Informal brunch, Q&A with panel of medical students/residents, debriefing session, questionnaire/evaluation completion

12 pm

Departure

Preliminary Evaluation

Second-look weekend participants who had decided to matriculate at the UTCOM were asked, as part of an informal group discussion, factors which influenced their decision to matriculate at the medical school, and these participants were also followed up with a survey. The questions posed in the informal group discussion were, "What factors influenced your decision to matriculate at the medical school?" and "Was SNMA an influential factor in your decision to matriculate at the UTCOM?" All participants stated that the SNMA initiative was an influential factor in their decision to matriculate at the medical school.

Follow-up anonymous surveys were distributed to student participants of the second-look weekend to determine if the SNMA initiative had any direct impact on their decision to matriculate at the medical school. The questions in the survey were as follows: "How would you rate SNMA in terms of being contacted and/or meeting SNMA representatives as a factor in your decision to come to UTCOM?" The surveys were ranked on a scale of 1 to 5, with 5 being excellent and 1 being poor. In the surveys, 100% of those who matriculated indicated such with a ranking of 4 or 5, that the SNMA initiative was an influential factor in their decision to matriculate at the medical school. Two students went on further to include comments next to their ranking. Student 1 stated that the initiative was "crucial" in the decision process. Student 2 stated that the initiative was "excellent" and the "main reason" for deciding to matriculate at the UTCOM. These data are preliminary, and one cannot conclude a trend based on the 2006 admissions statistics; however, one can see that the collaborative initiative may help to facilitate a trend towards improvement in the numbers of URM students. This initiative represents a preliminary model that can be used at institutions to complement existing diversity recruitment efforts.

Institutional Involvement

The SNMA recruitment initiative was proposed and implemented by students in collaboration with various administrative infrastructures. Senior administrative members such as the president, vice president and deans in the college of medicine have invested their time and support by allocating some funds and speaking at functions related to various phases of the SNMA recruitment initiative. They have all stated their strong support for the recruitment strategies to increase diversity at the medical school. The medical school office of admissions in particular is continuing the collaboration with the SNMA.

The senior administrators of the medical school realized the need to have a senior leadership position for diversity created specifically for the college of medicine; thus, in 2006, the college of medicine established a search committee to hire a candidate for the inaugural dean for diversity position. SNMA members were se-

lected to sit on the search committee and have in-depth input on the interviewing and evaluation of candidates. One of the duties of this position entails serving as an administrative support infrastructure for minority medical student organizations such as the SNMA. Furthermore, the institution has shown its commitment through establishing a diversity taskforce and subcommittee to address recruitment of URM students on the University of Toledo Health Science Campus. The African-American recruitment subcommittee in particular has been very supportive of the SNMA's recruitment and retention initiatives on campus.

Limitations of Collaboration with a Student Organization

There are some inherent limitations in collaborating with a student organization. Some of the limitations are the sustainability and longevity of the initiatives when there is a change in student leadership or when the students graduate. However, since this initiative is being done in collaboration with an administrative infrastructure, a template has been set for further success of the initiative despite the change in leadership. This template can be adapted and changed to fit the needs of recruiting students while still maintaining the collaboration between a minority medical student organization.

CONCLUSIONS

Minority medical student organizations, particularly the SNMA, can be used as a recruiting and retention tool, especially in an environment with low numbers of URM students. Other URM student organizations that can serve as a recruiting force are organizations such as the Latino Medical Student Association (LMSA) and Association of Native American Medical Students (ANAMS). There are many students who look at the strength of the minority medical student organization and other diversity support groups in their decision process; therefore, admissions offices cannot negate the usefulness of having formal involvement of minority medical student organizations as a recruiting tool. It is the glue and source of support for many students of color as they progress through their medical academic training. The UTCOM admissions office took a very progressive approach in collaborating with the school's chapter of the SNMA to increase the number of URM matriculants at the college of medicine. Medical schools and residency programs with low numbers of URM matriculants may consider collaborating with a minority medical student organization to help increase their numbers. Formal involvement of minority medical student organizations may contribute to recruitment factors in increasing diversity in the physician workforce to bridge the health disparities gap. This is a preliminary template that can be used by minority medical student organizations at academic institutions and medical centers to complement

existing diversity recruitment strategies. This model is also applicable to residency programs and other graduate fields with a severe shortage of URM students such as nursing and allied health professional fields, science, math and engineering.

Future Directions

The medical school is currently in the process of hiring a candidate for the inaugural dean for diversity position to provide an umbrella supportive infrastructure through which the SNMA recruitment collaborative initiative can be expanded and continued. The goal is that even through the change in SNMA leadership a template has been set for further longevity and success of the initiatives.

ACKNOWLEDGEMENTS

I thank Louis L. Cregler, MD; Ann Steinecke, PhD; WilleAnn Moore, MD; Patricia Hogue, PhD; and Sharon Thomas for helpful input and support of my manuscript.

REFERENCES

1. Smedley BD, Stith AY, Nelson R, eds. *Unequal Treatment: confronting racial and ethnic disparities in health care*. Washington, DC: Institutes of Medicine, National Academies Press; 2002:29-120.
2. Association of American Medical Colleges. Statement on the physician work-force, June 2006. Washington, DC: Association of American Medical Colleges; 2006. www.aamc.org/workforce/. Accessed 03/20/07.
3. Cohen JJ, Steinecke A. Building a diverse physician workforce. *JAMA*. 2006;296(9):1135-1136.
4. American Medical Association 2006. www.ama-assn.org/. Accessed 03/20/07.
5. Matriculants by Race and Ethnicity within Sex, 2003-2006. Association of American Medical Colleges; 2006. www.aamc.org/data/facts/2006/2003to2006dermat.htm. Accessed 03/20/07.
6. U.S. Census Bureau. www.census.gov/. Accessed 03/20/07.
7. Whittle DK, Orfield G, Silen W, et al. Educational benefits of diversity in medical school: a survey of students. *Acad Med*. 2003;78:460-466.
8. Chisolm MA. Diversity: a missing link to professionalism. *Am J Pharm Educ*. 2004;68(5):article 120.
9. Cantor JC, Miles EL, Barker DC, et al. Physician service to the underserved: implications for affirmative action in medical education. *Inquiry*. 1996;33:167-180.
10. Moy E, Bartman BA. Physician race and care of minority and medically indigent patients. *JAMA*. 1995;273:1515-1523.
11. Komaromy M, Grumbach K, Drake M, et al. The role of Black and Hispanic physicians in providing health care for underserved populations. *N Engl J Med*. 1996;334:1305-1310.
12. Cregler LL, McGanney ML, Roman SA, et al. Refining a method of identifying CUNY Medical School graduates practicing in underserved areas. *Acad Med*. 1997;72(9):794-797.
13. Roman SA. Addressing the urban pipeline challenge for the physician workforce: the Sophie Davis Model. *Acad Med*. 2004;79(12):1175-1183.
14. Thomson WA, Ferry PG, King JE, et al. Increasing access to medical education for students from medically underserved communities: one program's success. *Acad Med*. 2003;78(5):454-459.
15. Blakely AW, Broussard LG. Blueprint for establishing an effective post-baccalaureate medical school pre-entry program for educationally disadvantaged students. *Acad Med*. 2003;78(5):437-447.

RECRUITMENT OF UNDERREPRESENTED MINORITY STUDENTS

16. Wadenya RO, Schwartz S, Lopez N, et al. Strategies for recruitment and retention of underrepresented minority students at the University of Pennsylvania School of Dental Medicine. *J Dent Educ*. 2003;67(9):1039-1041.

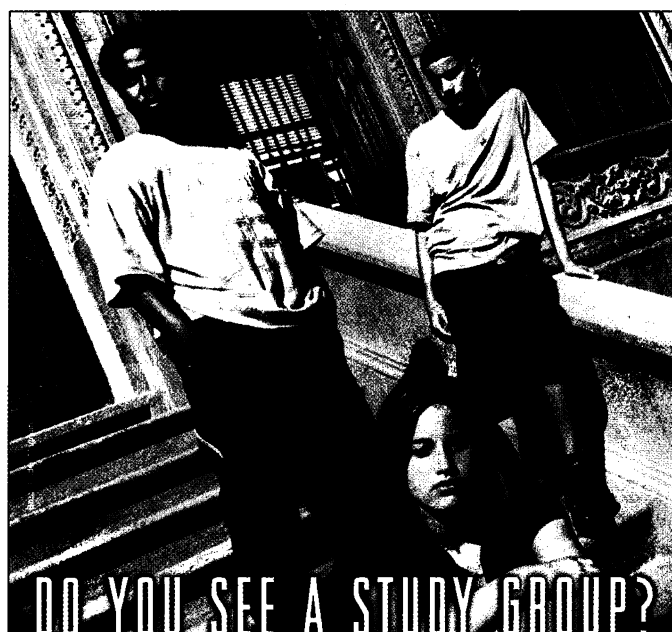
17. Patterson DG, Carline JD. Promoting minority access to health careers through health profession-public school partnerships: a review of the literature. *Acad Med*. 2006;81(6 suppl):S5-10.

18. University of Toledo Mission Statement. <http://utoledo.edu/campus/about/mission.html>. Accessed 04/01/07.

19. Student National Medical Association History. www.snma.org/about-history.php. Accessed 03/28/07. ■

We Welcome Your Comments

The *Journal of the National Medical Association* welcomes your Letters to the Editor about articles that appear in the *JNMA* or issues relevant to minority healthcare. Address correspondence to EditorJNMA@nmanet.org.



THEN YOU SEE THE POWER OF COMMUNITY COALITIONS.

They help community groups - like the PTA®, your church, clubs, even your employer - organize resources and focus them where they're needed most. Especially fighting to keep kids away from drugs. If you're in a community group, ask if you can do more by teaming up with a community coalition. It's really simple. Just go to www.helpyourcommunity.org or call 1-877-KIDS-313 to contact a community coalition in your area. They'll tell you exactly how your group can help. You'll be surprised at what you have to offer. And how much you can accomplish.

YOU GET MORE WHEN YOU GET TOGETHER

Office of National Drug Control Policy

